

Ohio EPA - Daily Discharge Monitoring Report - Form 4500

SUBMISSION ID:	714311	STATUS:	Original
FACILITY:	Dovetail Energy LLC - Anaerobic Digestion Facility	PERMIT NUMBER:	1IN00305*AD
LOCATION:	1146 Herr Rd Fairborn, OH 45324	STATION CODE:	581
COUNTY:	Greene	MONITORING PERIOD :	2017-10-01 To: 2017-10-31
DISTRICT:	SWDO	REPORTING LAB:	MAI Environmental Science
		ANALYST:	N/A
		NO DISCHARGE INDICATOR:	

PARAMETER	Biochemical Oxygen Demand, 5 Day	pH	Oil and Grease, Hexane Extr Method	Ammonia (NH3) In Sludge	Nitrogen Kjeldahl, Total In Sludge	Phosphorus, Total In Sludge	Potassium In Sludge
PARAMETER CODE	00310	00400	00552	00611	00627	00668	00938
UNITS	mg/l	S.U.	mg/l	mg/kg	mg/kg	mg/kg	mg/kg
FREQUENCY	1/Month	1/Month	1/Month	1/Month	1/Month	1/Month	1/Month
SAMPLING TYPE	Composite	Composite	Composite	Composite	Composite	Composite	Composite
2017-10-01							
2017-10-02							
2017-10-03							
2017-10-04							
2017-10-05							
2017-10-06							
2017-10-07							
2017-10-08							
2017-10-09							
2017-10-10							
2017-10-11							
2017-10-12							
2017-10-13							
2017-10-14							
2017-10-15							
2017-10-16							
2017-10-17							
2017-10-18							
2017-10-19							
2017-10-20							
2017-10-21							
2017-10-22							
2017-10-23							
2017-10-24							
2017-10-25							
2017-10-26	2300	7.44	5930	56300	11000	33500	12300
2017-10-27							
2017-10-28							
2017-10-29							
2017-10-30							
2017-10-31							
Minimum	2300.0	7.44	5930.0	56300.0	11000.0	33500.0	12300.0
Maximum	2300.0	7.44	5930.0	56300.0	11000.0	33500.0	12300.0
Average	2300		5930	56300	11000	33500	12300
Count	1	1	1	1	1	1	1
Name of Responsible Official or Authorized Representative	I certify under the penalty of law that I have personally examined and am familiar with the information submitted herein and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.			Signature of Responsible Official or Authorized Representative		Submission Date/Time	
Taylor Faecher						Certification Version Date 2017-11-20 13:11	

Ohio EPA - Daily Discharge Monitoring Report - Form 4500

SUBMISSION ID:	714311	STATUS:	Original
FACILITY:	Dovetail Energy LLC - Anaerobic	PERMIT NUMBER:	1IN00305*AD
LOCATION:	Digestion Facility	STATION CODE:	581
	1146 Herr Rd	MONITORING PERIOD :	2017-10-01 To: 2017-10-31
	Fairborn, OH 45324	REPORTING LAB:	MASI Environmental Science
COUNTY:	Greene	ANALYST:	N/A
DISTRICT:	SWDO	NO DISCHARGE INDICATOR:	

PARAMETER	Arsenic, Total In Sludge	Cadmium, Total In Sludge	Copper, Total In Sludge	Lead, Total In Sludge	Nickel, Total In Sludge	Zinc, Total In Sludge	Selenium, Total In Sludge
PARAMETER CODE	01003	01028	01043	01052	01068	01093	01148
UNITS	mg/kg	mg/kg	mg/kg	mg/kg	mg/kg	mg/kg	mg/kg
FREQUENCY	1/Month	1/Month	1/Month	1/Month	1/Month	1/Month	1/Month
SAMPLING TYPE	Composite	Composite	Composite	Composite	Composite	Composite	Composite
2017-10-01							
2017-10-02							
2017-10-03							
2017-10-04							
2017-10-05							
2017-10-06							
2017-10-07							
2017-10-08							
2017-10-09							
2017-10-10							
2017-10-11							
2017-10-12							
2017-10-13							
2017-10-14							
2017-10-15							
2017-10-16							
2017-10-17							
2017-10-18							
2017-10-19							
2017-10-20							
2017-10-21							
2017-10-22							
2017-10-23							
2017-10-24							
2017-10-25							
2017-10-26	22	1	2	6	14	468	3
2017-10-27							
2017-10-28							
2017-10-29							
2017-10-30							
2017-10-31							
Minimum	22.0	1.0	2.0	6.0	14.0	468.0	3.0
Maximum	22.0	1.0	2.0	6.0	14.0	468.0	3.0
Average	22	1	2	6	14	468	3
Count	1	1	1	1	1	1	1
Name of Responsible Official or Authorized Representative	I certify under the penalty of law that I have personally examined and am familiar with the information submitted herein and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.			Signature of Responsible Official or Authorized Representative		Submission Date/Time	
Taylor Faecher						Certification Version Date 2017-11-20 13:11	

Ohio EPA - Daily Discharge Monitoring Report - Form 4500

SUBMISSION ID:	714311	STATUS:	Original
FACILITY:	Dovetail Energy LLC - Anaerobic	PERMIT NUMBER:	1IN00305*AD
LOCATION:	Digestion Facility	STATION CODE:	581
	1146 Herr Rd	MONITORING PERIOD :	2017-10-01 To: 2017-10-31
	Fairborn, OH 45324	REPORTING LAB:	MASI Environmental Science
COUNTY:	Greene	ANALYST:	N/A
DISTRICT:	SWDO	NO DISCHARGE INDICATOR:	

PARAMETER	Fecal Coliform in Sludge	Sludge Fee Weight	Sludge Weight	Sludge Solids, Percent Total	Mercury, Total In Sludge	Molybdenum In Sludge	
PARAMETER CODE	31641	51129	70316	70318	71921	78465	
UNITS	MPN/G	dry tons	Dry Tons	%	mg/kg	mg/kg	
FREQUENCY	1/Month	1/Month	1/Month	1/Month	1/Month	1/Month	
SAMPLING TYPE	Composite	Total	Total	Composite	Composite	Composite	
2017-10-01							
2017-10-02							
2017-10-03							
2017-10-04							
2017-10-05							
2017-10-06							
2017-10-07							
2017-10-08							
2017-10-09							
2017-10-10							
2017-10-11							
2017-10-12							
2017-10-13							
2017-10-14							
2017-10-15							
2017-10-16							
2017-10-17							
2017-10-18							
2017-10-19							
2017-10-20							
2017-10-21							
2017-10-22							
2017-10-23							
2017-10-24							
2017-10-25							
2017-10-26	671	224.63	224.63	7.42	.04	1	
2017-10-27							
2017-10-28							
2017-10-29							
2017-10-30							
2017-10-31							
Minimum	671.0	224.63	224.63	7.42	0.04	1.0	
Maximum	671.0	224.63	224.63	7.42	0.04	1.0	
Average	671	224.63	224.63	7.42	0.04	1	
Count	1	1	1	1	1	1	
Name of Responsible Official or Authorized Representative	I certify under the penalty of law that I have personally examined and am familiar with the information submitted herein and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.			Signature of Responsible Official or Authorized Representative		Submission Date/Time	
Taylor Faecher						Certification Version Date 2017-11-20 13:11	

Ohio EPA - Daily Discharge Monitoring Report - Form 4500

SUBMISSION ID:	714311	STATUS:	Original
FACILITY:	Dovetail Energy LLC - Anaerobic	PERMIT NUMBER:	1IN00305*AD
LOCATION:	Digestion Facility	STATION CODE:	584
	1146 Herr Rd	MONITORING PERIOD :	2017-10-01 To: 2017-10-31
	Fairborn, OH 45324	REPORTING LAB:	
COUNTY:	Greene	ANALYST:	
DISTRICT:	SWDO	NO DISCHARGE INDICATOR:	AL

PARAMETER	Biochemical Oxygen Demand, 5 Day	pH	Oil and Grease, Hexane Extr Method	Ammonia (NH3) In Sludge	Nitrogen Kjeldahl, Total In Sludge	Phosphorus, Total In Sludge	Potassium In Sludge
PARAMETER CODE	00310	00400	00552	00611	00627	00668	00938
UNITS	mg/l	S.U.	mg/l	mg/kg	mg/kg	mg/kg	mg/kg
FREQUENCY	1/Month	1/Month	1/Month	1/Month	1/Month	1/Month	1/Month
SAMPLING TYPE	Composite	Composite	Composite	Composite	Composite	Composite	Composite
2017-10-01							
2017-10-02							
2017-10-03							
2017-10-04							
2017-10-05							
2017-10-06							
2017-10-07							
2017-10-08							
2017-10-09							
2017-10-10							
2017-10-11							
2017-10-12							
2017-10-13							
2017-10-14							
2017-10-15							
2017-10-16							
2017-10-17							
2017-10-18							
2017-10-19							
2017-10-20							
2017-10-21							
2017-10-22							
2017-10-23							
2017-10-24							
2017-10-25							
2017-10-26							
2017-10-27							
2017-10-28							
2017-10-29							
2017-10-30							
2017-10-31							
Minimum							
Maximum							
Average							
Count							
Name of Responsible Official or Authorized Representative	I certify under the penalty of law that I have personally examined and am familiar with the information submitted herein and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.			Signature of Responsible Official or Authorized Representative		Submission Date/Time	
Taylor Faecher						Certification Version Date 2017-11-20 13:11	

Ohio EPA - Daily Discharge Monitoring Report - Form 4500

SUBMISSION ID:	714311	STATUS:	Original
FACILITY:	Dovetail Energy LLC - Anaerobic	PERMIT NUMBER:	1IN00305*AD
LOCATION:	Digestion Facility	STATION CODE:	584
	1146 Herr Rd	MONITORING PERIOD :	2017-10-01 To: 2017-10-31
	Fairborn, OH 45324	REPORTING LAB:	
COUNTY:	Greene	ANALYST:	
DISTRICT:	SWDO	NO DISCHARGE INDICATOR:	AL

PARAMETER	Arsenic, Total In Sludge	Cadmium, Total In Sludge	Copper, Total In Sludge	Lead, Total In Sludge	Nickel, Total In Sludge	Zinc, Total In Sludge	Selenium, Total In Sludge
PARAMETER CODE	01003	01028	01043	01052	01068	01093	01148
UNITS	mg/kg	mg/kg	mg/kg	mg/kg	mg/kg	mg/kg	mg/kg
FREQUENCY	1/Month	1/Month	1/Month	1/Month	1/Month	1/Month	1/Month
SAMPLING TYPE	Composite	Composite	Composite	Composite	Composite	Composite	Composite
2017-10-01							
2017-10-02							
2017-10-03							
2017-10-04							
2017-10-05							
2017-10-06							
2017-10-07							
2017-10-08							
2017-10-09							
2017-10-10							
2017-10-11							
2017-10-12							
2017-10-13							
2017-10-14							
2017-10-15							
2017-10-16							
2017-10-17							
2017-10-18							
2017-10-19							
2017-10-20							
2017-10-21							
2017-10-22							
2017-10-23							
2017-10-24							
2017-10-25							
2017-10-26							
2017-10-27							
2017-10-28							
2017-10-29							
2017-10-30							
2017-10-31							
Minimum							
Maximum							
Average							
Count							
Name of Responsible Official or Authorized Representative	I certify under the penalty of law that I have personally examined and am familiar with the information submitted herein and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.			Signature of Responsible Official or Authorized Representative		Submission Date/Time	
Taylor Faecher						Certification Version Date 2017-11-20 13:11	

Ohio EPA - Daily Discharge Monitoring Report - Form 4500

SUBMISSION ID:	714311	STATUS:	Original
FACILITY:	Dovetail Energy LLC - Anaerobic	PERMIT NUMBER:	1IN00305*AD
LOCATION:	Digestion Facility	STATION CODE:	584
	1146 Herr Rd	MONITORING PERIOD :	2017-10-01 To: 2017-10-31
	Fairborn, OH 45324	REPORTING LAB:	
COUNTY:	Greene	ANALYST:	
DISTRICT:	SWDO	NO DISCHARGE INDICATOR:	AL

PARAMETER	Fecal Coliform in Sludge	Sludge Fee Weight	Sludge Weight	Mercury, Total In Sludge	Molybdenum In Sludge		
PARAMETER CODE	31641	51129	70316	71921	78465		
UNITS	MPN/G	dry tons	Dry Tons	mg/kg	mg/kg		
FREQUENCY	1/Month	1/Month	1/Month	1/Month	1/Month		
SAMPLING TYPE	Multiple Grab	Total	Total	Composite	Composite		
2017-10-01							
2017-10-02							
2017-10-03							
2017-10-04							
2017-10-05							
2017-10-06							
2017-10-07							
2017-10-08							
2017-10-09							
2017-10-10							
2017-10-11							
2017-10-12							
2017-10-13							
2017-10-14							
2017-10-15							
2017-10-16							
2017-10-17							
2017-10-18							
2017-10-19							
2017-10-20							
2017-10-21							
2017-10-22							
2017-10-23							
2017-10-24							
2017-10-25							
2017-10-26							
2017-10-27							
2017-10-28							
2017-10-29							
2017-10-30							
2017-10-31							
Minimum							
Maximum							
Average							
Count							
Name of Responsible Official or Authorized Representative <div style="text-align: center; font-size: 1.2em;">Taylor Faecher</div>		I certify under the penalty of law that I have personally examined and am familiar with the information submitted herein and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.			Signature of Responsible Official or Authorized Representative		Submission Date/Time <div style="text-align: center;"> Certification Version Date 2017-11-20 13:11 </div>

Ohio EPA - Daily Discharge Monitoring Report - Form 4500

FACILITY:

LOCATION:

Dovetail Energy LLC - Anaerobic
Digestion Facility
1146 Herr Rd
Fairborn, OH 45324

PERMIT NUMBER:

MONITORING PERIOD :

1IN00305*AD
2017-10-01 To: 2017-10-31

PARAMETER COMMENTS:

Station Code	Parameter Name	Parameter Code	Date	Unit	Comment
-----------------	-------------------	-------------------	------	------	---------